

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MD		1/19/00
O.I.P.E. CLASSIFIER		68972	01-03-00
FORMALITY REVIEW	FD		2/11/00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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